

October 07, 2016

The Honorable Secretary Sylvia Matthew Burwell The U.S. Department of Health & Human Services Hubert H. Humphrey Building 200 Independence Avenue, S.W. Washington, D.C. 20201 Attn: Secretary Burwell

Re: Kentucky's 1115 Medicaid Waiver Application, Kentucky HEALTH

Dear Secretary Burwell,

As a group of concerned citizens, advocates, and professionals working together to improve oral health across Kentucky, the Kentucky Oral Health Coalition (KOHC) mission is to improve the oral health of all people of Kentucky. KOHC's vision of impact is to engage partners across the state to create a collaborative oral health campaign designed to create optimal oral health for all by:

- Educating parents
- Activating policymakers
- Inspiring health professionals
- Engaging the public

The KOHC's current priorities include:

- 1. Improving oral health awareness,
- 2. Expanding school-based oral health services, and
- 3. Increasing access to oral health care.

Kentucky Oral Health Coalition members value the Cabinet for Health and Family Services and Kentucky Department for Medicaid Services' work towards promoting good health for individuals and families in the Commonwealth. Children, pregnant women, individuals determined medically frail, and low income adults eligible for Medicaid prior to expansion (Section 1931 parents) are protected from the potential negative impacts of a reduced dental benefit package could have, and we thank Governor Bevin for considering those vulnerable Kentuckians.

Although these positive exemptions are in place, there are dental previsions in the Kentucky HEALTH proposal that we are concerned will directly impact low-income adults who received coverage through Medicaid expansion.

We recommend that the Kentucky HEALTH proposal include dental and vision benefits in the standard benefits package.

The proposed changes will eliminate many Kentucky adults' Medicaid dental coverage from the standard benefits package. Currently, Medicaid eligible adults have preventive and restorative dental coverage, which includes: exams, cleanings, x-rays, and fillings. Given our historic issues with poor oral health in Kentucky, we have made strides towards improvement in oral health by increasing access and preventive services. We as a Commonwealth cannot afford to move backward. Dental care needs to be a partner in the management of chronic diseases in order for a healthier Kentucky.

"There is a direct relationship to poor oral health, poor health, and financial affordability. Dental care is as important as diabetes, heart disease, and cancer – and they're interrelated." says Dr. William T Betz, acting Dean of Pikeville's Medical School and KOHC member.

Although the final Kentucky HEALTH proposal submitted to CMS by the Bevin Administration extended the implementation period for dental and vision benefits, KOHC is concerned about the loss of dental coverage for many adults in the Commonwealth. The proposal makes it difficult for adults to earn enough points in a My Rewards account to pay the Medicaid rates for dental services and receive immediate dental care. We believe this proposed change will cause people to forego care and lead to an increase in Emergency Room visits. KOHC also believes the inclusion of dental coverage should not be an earned benefit, but rather a key component in the standard benefits package.

"It would be very difficult for a patient who is already in pain from infected, mobile, and aching teeth to earn any benefits," says KOHC Executive Committee Member and Jefferson County Registered Dental Hygienist, Jennifer Hasch. "Pain and infection prevent people from learning, concentrating, working, and overall social participation. Oral care and wellness allow people to contribute to society, not the other way around," says Hasch.

Research from other states, such as, Oregon shows us that when parents have consistent health coverage, their children are more likely to stay covered and access health care. In 2014, after Medicaid expansion, over 100,000 more Kentuckians, mostly adults, received dental services than in 2013. We are concerned that if this waiver is implemented with the many requirements for parents, child dental coverage rates may decline during the waiver period. If parents do not access services, they will be less likely to take their children to do so, even if those services are covered under Medicaid or KCHIP.

We recommend that Kentucky HEALTH include a robust list of incentives for adults for example: taking kids for preventive dental visits and an oral health literacy class. For the Medicaid adult population, the cost barriers to purchase dental services through a My Rewards account is concerning. The proposal makes it difficult for adults to earn enough points in a My Rewards account to purchase the Medicaid fee rates for dental services. They would have to engage in several activities that they may not be able to complete in a timeframe when they need immediate dental care. Lastly, dental services are not comparable to purchasing a gym membership through the My Rewards account.

Linda Poynter, Registered Dental Hygienist of Northern Kentucky Health Department and KOHC member states that, "by utilizing the strong educational component of our program, we are able to educate parents on the need for dental prevention and treatment for themselves, not just their kids." This was

made possible by expansion, which provided families the ability to "both get out of dental pain and have a dental home of their own," says Poynter.

If the waiver is approved, we recommend the commonwealth of Kentucky extend the implementation timeline of this proposal and encourage the state to ensure Medicaid members have access to help if they have questions about their plan in person, by phone, and online. We also strongly recommend that help be available after regular business hours, so parents who work during the day can get help in the evening in understanding their plan.

Many Kentuckians will be significantly impacted by this proposal. Given the concerns listed above, KOHC's executive committee and members firmly believes the inclusion of dental coverage should not be an earned benefit, but rather a key component in the standard benefits package for the adult Medicaid population. We encourage CMS to protect and continue the improved health outcomes for Kentucky adults. Thank you for the opportunity to communicate our recommendations for the Kentucky HEALTH proposal. We appreciate your consideration of these suggested changes.

Sincerely,

Dr. Laura Hancock Jones Kentucky Oral Health Chair

Laura Plancock Jones, BUD